PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY			Attorney Doc	ket Number	DEP5157		
			First Named Inventor Kolb, Eric		Kolb, Eric		
FOR UTILITY OR DESIGN		!	COMPLETE IF KNOWN				
	APPLICATION CFR 1.63) Declaration Subm Initial Filing (Sur (37 CFR 1.16(e))		Application N	lumber			
Declaration Submitted with		rcharge	Filing Date				
•			Group Art Ur	nit	1		
			Examiner Na	ıme			
As a below named inventor	r, I hereby declare that						
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Bone Fixation Systems (Title of the Invention)							
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claim)	
Additional facaism and I	notion numbers are liste	dongova	Jomental aris-	Try dots check!	PTO/SB/02B attached hereto:		

DECLARATION - Utility or Design Patent Application							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:							
Application Serial No.	Filing Date	Status					
		Patented Patented Patented					
I hereby appoint:							
Practitioners at Customer Number	Place Customer Number Bar Code Label Here						
Practitioner(s) named below: Name David A. Lane, Jr. Registration Number 39,261							
as my/our attomey(s) or agent(s) to prose States Patent and Trademark Office conr	ecute the application identified above, and nected therewith.	to transact all business in the United					
Address all telephone calls to David Lane at tele	phone number (508) 880-8488.						
Customer Number Direct all correspondence to:							
Name:							
Address:							
Address:							
City:	State:	ZIP					
Country	Telephone:	Fax:					

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements w re made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Eric Family Name or Surname Kolb							
Inventor's Signature	Date 9/12/03						
Residence: City Quincy	ce: City Quincy State MA		ntry USA	Citizenship U.S.			
Mailing Address 308 Quarry Street, Apt. #50	1						
City Quincy	State MA		02169	Country USA			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SECOND INVENTOR:	☐ A pe	etition has been	filed for this unsign	ned inventor			
Given Name Fa			Family Name or Surname				
Inventor's Signature Date							
Residence: City	State	Country		Citizenship			
Mailing Address							
City	State	ZIP		Country			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF THIRD INVENTOR:	☐ A pe	etition has beer	filed for this unsign	ned inventor			
Given Name (first and middle [if any])	Family Name or Surname						
Inventor's Signature			Date				
Residence: City	State	Cou	ıntry	Citizenship			
Mailing Address							
City	State	7IP		Country			